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File with: lows Ethics and Campaign Disclosure Board



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Des Moines, lowa 50319 Fax: 515-281-4073	FOR INSTRUCTIONS, DISCLOSURE SI			(11 4 (00)
COMMITTEE NAME (Nest be	e seme as on Statement of Organiza	rition)	7	
Commutee to Ele	e seme as on Statement of Organiza Let Dubra Sattern	for State House		
MPORTANT: Indicate by # type	of committee you are reporting for:		1 1	R-2 DISCLOSURE
1)Statuwide/Legislative/Judge : A)County Central Committee ()	Standing for Returtion Candidate (2)9 5)County Candidate (4)City Candidate	into PAC (3)State Party • (7)School Board or Other Political		
Subdivision Candidate (8)Coun 1) Local Ballot Issue	ty PAC (9)City PAC (10)School Boss	d or Other Political Subdivision PAC	(Fer O	Tice Use Ordy 1756
CANDIDATE COMMITTEES	ONLY:		Logge	d in Q
Candidate Name		Political Party (if applicable)	Scann	ed
Dibra Sater	Λ		Comp	wks wrs
Office Sought		District (if Senate or House)	Audite	5-13-09 e
Ia. House				
ate reports are subject to poss	jiolo civil and criminal penalties. Pursu	unt to lows Code sections 688.32/	L(7) and 68A.4	01(3), the candidate, for a
		•		
Mund	Hem	7/2.362.2860	_9-	24-09 DATE SIGNED
SIGNATURE OF PERSON FI	LING REPORT	TELEPHONE		DATE SIGNED
	22			
AM FILING A	March 20, 2009			ECTION YEAR.
(I	report date)	indicate by		
CHECK IF AMENDMENT	TO REPORT DATED		Local Committe	ees, enter Data of Election
Theel Sthick Stand Assants	45.			
	nakkunt ramoni sing astama sentima mi i	issolution Form DR-3.	200000	Committees ander County in
(You must continue	nation) report and attach reduce of D to file reports until a DR-3 is filed.)	issolution Form DR-3.	County & Loca which Election	Committees, enter County in is held
(You must continue	nation) report and attach reduce or L to file reports until a DR-3 is filed.)	issolution Form DR-3.		
(You must continue	to file reports until a DR-3 is filed.)	issolution Form DR-3.		
(You must continue	to file reports until a DR-3 is filed.) MENT OF CASH ON HAND			
(You must continue STATER CASH ON HAND at the begin	to file reports until a DR-3 is filed.) MENT OF CASH ON HAND nning of the reporting period. (Total	of all funds held by the	which Election	is held
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For instructions.	Sac	Back	of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) · Comm. to Elect Detre Satern

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION MUNIBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any riel outgoing by any person other than statutory political committees.

DATE RECEIVED (MM/DDYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATES (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
10/25/08	ID#	Justin Letham	freend freend	\$ 2500	
10/31/08	ID# CK#	Edwa Clarken Konswith Chy Reps.	freid	2500	
11/3/00	10# 9112 CK#	Kosseth Chy Reps.		15000	
3/25/09	ID# CK#				
	ID# CK#				
	CK#				
	ID# CK#				
	ID# CK#				
	ID#				
	ID# CK#				
			SUB-TOTAL	\$ 4000	

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (If last page of this schedule)

FOR INSTR	LUCTIONS	SEE BACK	OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NOING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) tate House

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursoment) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-31-08	ID# CK# ¾	Estheruille, # 56013	Ad	399.50 \$
10-31-68	CK# *	Spencer, IA 51301	Aq	649.20
O-31-08	ID# CK# ¾	Eville Theateng 620 central Ave Estherville, In 51334	Jax Dec.	12.19
10-31-08	ID#	USPS 605 2nd Ave N 65therville, IA 51334	Stamps	54000
10-29-08	ID# CK#	USPS	Stamps	16200
	ID# CK#			
	ID#			
	ID# CK#			
vesses pe	v Internet		SUB-TOTA TOTAL (if last page of this schedule)	

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-rateing, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A-402(3)(i).)

	1		1
Page		of	

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be some as on Statement of Organization) for Hate House	_

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

_	_	_	-	_	-
	-	Title	1227	22	-27
-		Y 7.1			DC C
- 562		500			
					200
				1000	20.1

SCHEDULE D (Rev. 08/96)	INCURRED
	CK THIS BOX MENDING IM

p.6

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F) An "incurred debit is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10-30-0Y	West Bend, I owa 50597	ads	7275
11-3-08	2P Rublications 1417 Indian Hills Dr. Spirit Lake, IA 5/360	aan	87 =
11-1-08	FOR E. Robins Ave Manual IA 51342	aas	47.83
10-23-08	10 Publications	new spap -	8/00
		SUB-TOTAL	302,58

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD

"If actual figure is unknown, show "estimated" baside the figure.

(for Schedule D)

CANDIDATE COMMITTEES NOTE:

CAPELIUM RECOMMENDED FOR THE:

Trouved indubtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, poling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.